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Total Pages Including Cover: 12

TO: Examiner Gina N. Cornelio
Art Unit: 2879**Company:** USPTO**Fax #:** 571-273-8300**Phone #:** 571-272-8978**Application
Serial No.** 10/517,916**Docket #:** NL020559**FROM:** Michael J. Balconi-Lamica
Reg. No. 34,291**Michael J. Balconi-Lamica**
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MESSAGE: EXPEDITED PROCEDUREPlease deliver to **Examiner Gina N. Cornelio (Art Unit 2879)**, MS Amendment

Examiner Cornelio:

Attached for filing are the following documents:

1. Transmittal Form; and
2. Response.

Entry of this paper in the above-identified application is courteously solicited. No fee is believed due. Any questions regarding this matter should be directed to the undersigned.


Michael J. Balconi-Lamica

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PTO/SB/21 (09-04)

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/517,916
	Filing Date	December 14, 2004
	First Named Inventor	Allard Arend Boomkens
	Art Unit	2879
	Examiner Name	Gina N. Cornelio
Total Number of Pages in This Submission	12	Attorney Docket Number NL020559

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div style="border: 1px solid black; padding: 5px;"> Remarks PLEASE deliver the attached to Examiner Gina N. Cornelio (Art Unit 2879). </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Michael J. Balconi-Lamica		
Signature	<i>Michael J. Balconi-Lamica</i>		
Printed name	Michael J. Balconi-Lamica		
Date	6/21/06	Reg. No.	34,291

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:			
Signature	<i>Michael J. Balconi-Lamica</i>		
Typed or printed name	Michael J. Balconi-Lamica	Date	6/21/06

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT
Docket No.: NL020559
Customer No. 000024737**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:	§	
Allard Arend Boomkens	§	Confirmation No. 8865
	§	
Serial No.: 10/517,916	§	Group Art Unit: 2879
	§	
Filed: December 14, 2004	§	Examiner: Gina N. Cornelio
	§	
For: CAPPED ELECTRICAL LAMP AND	§	
LOW-PRESSURE MERCURY-VAPOR	§	
DISCHARGE LAMP	§	

RESPONSE TO OFFICE ACTION

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Examiner:

In response to the Office Action mailed March 23, 2006, please amend the above-identified application as follows:

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 7 of this paper.